

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor, if only one name is listed below, or an original, first and joint inventor, if plural names are listed below, of the subject matter which is claimed and for which a patent is sought on the invention entitled APPARATUS FOR TREATMENT AND PREVENTION OF ALOPECIA, the specification of which is attached hereto.

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the United States Patent and Trademark Office (the Office), all information which is known by me to be material to patentability as defined in Title 37, Code of Federal Regulations (C.F.R.), Section 1.56.

CLAIM OF PRIORITY

I hereby claim foreign benefits under Title 35, United States Code (U.S.C.), Section 119(a)-(d) or § 365(b), of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or of any PCT international application, having a filing date before that of the application on which priority is claimed.

None

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

U.S. Serial No. 60/276,591, filed on March 16, 2001, and now copending

POWER OF ATTORNEY

I hereby appoint the practitioners associated with the Customer Number provided below (*i.e.*, the practitioners associated with the law firm of Price, Heneveld, Cooper, DeWitt and Litton) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Please direct all correspondence to the address associated with that Customer Number.

Customer Number 000,277

All statements made herein of my own knowledge are true and all statements made on information and belief are believed to be true, and further, these statements are made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of this application or any patent issued thereon.

Sole or First joint inventor:

Second joint inventor:

Steven L. Ringler, M.D. Date
Citizenship: U.S.A.
Residence: 1475 Tammarron SE
Grand Rapids, Michigan 49546
Post Office Address: Same as above

John K. Biener Date
Citizenship: U.S.A.
Residence: 192 Hunters Lane NE
Rockford, Michigan 49341
Post Office Address: Same as above